



FEB - 5 2001

P.O. Box 708 Warsaw, IN 46581-0708 219 267-6131

Summary of Safety and Effectiveness

Submitted By:

Zimmer, Inc. P.O. Box 708 Warsaw, Indiana 46581-0708 219-267-6131

• Contact Person:

Karen Cain
Senior Regulatory Affairs Associate
Telephone: 219/372-4219
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Date:

November 7, 2000

Trade Name:

Trilogy® Acetabular System, 46 mm Large Head Liners

Common Name:

Polyethylene Acetabular Liners

• Classification Name:

Hip Joint Metal/Polymer/Metal Semiconstrained Porous-Coated Uncemented Prosthesis

Predicate Devices:

- Inter-Op DURASUL Acetabular Insert, manufactured by Sulzer Orthopedics, Inc., K993259, cleared March 10, 2000
- *Trilogy* Acetabular System, manufactured by Zimmer, Inc., K934765, cleared April 29, 1994

- Trilogy Acetabular System, Longevity® Crosslinked Polyethylene Liners, manufactured by Zimmer, Inc., K990135, cleared July 12, 1999
- Trilogy Acetabular System, 7 mm Offset, manufactured by Zimmer, Inc., K954698, cleared January 17, 1996
- Trilogy® Acetabular System Large Head Liners, manufactured by Zimmer, Inc., K002960, currently pending review at FDA.

Device Description

The *Trilogy* 46 mm Large Head Liners are acetabular shell liners manufactured from ultra-high molecular-weight polyethylene (UHMWPE). The 46 mm Large Head Liners are used in conjunction with currently marketed *Trilogy* Acetabular Shells and serve as the articular surface of the acetabular component in total hip replacement. These liners feature a 10-degree elevated rim and oversized inner diameters to provide increased range of motion and stability to the hip joint of a patient.

Wear testing and locking mechanism integrity evaluations all indicated that this line addition would perform as intended and similar to legally marketed devices. The results of *in vitro* wear tests have not been shown to correlate with clinical wear mechanisms.

Intended Use

The *Trilogy* 46 mm Large Head Liners are intended for use with the *Trilogy* Acetabular System Shells in cemented or noncemented use in skeletally mature individuals undergoing primary or revision surgery for rehabilitating hips damaged as a result of noninflammatory degenerative joint disease (NIDJD) or its composite diagnoses of osteoarthritis, avascular necrosis, protrusio acetabuli, traumatic arthritis, slipped capital epiphysis, fused hip, fracture of the pelvis, and diastrophic variant.

Comparison to Predicate Devices

The *Trilogy* 46 mm Large Head Liners are substantially equivalent to the above named devices in that all are intended to replace the bearing surface of the acetabulum. All predicate devices, as well as the *Trilogy* 46 mm Large Head Liners, are manufactured from UHMWPE and are intended for cemented or cementless use.

RA10002K.510



FEB - 5 2001

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Ms. Karen Cain Senior Regulatory Affairs Associate Zimmer, Inc. P.O. Box 708 Warsaw, Indiana 46581-0708

Re: K003478

Trade Name: Trilogy® Acetabular System, 46mm Large Head Liners

Regulatory Class: II Product Code: LPH Dated: November 7, 2000

Received: November 9, 2000

Dear Ms. Cain:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the current Good Manufacturing Practice requirement, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic (QS) inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or at (301) 443-6597, or at its Internet address "http://www.fda.gov/cdrh/dsmamain.html".

Sincerely yours,

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative and

Mark Mellers

Neurological Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

Exhibit H

Page 1 of 1 K003478 510(k) Number (if known) **Device Name:** Trilogy® Acetabular System, 46 mm Large Head Liners **Indications for Use:** The Trilogy Acetabular System is indicated for either cemented or noncemented use in skeletally mature individuals undergoing primary or revision surgery for rehabilitating hips damaged as a result of noninflammatory degenerative joint disease (NIDJD) or its composite diagnoses of osteoarthritis, avascular necrosis, protrusio acetabuli, traumatic arthritis, slipped capital epiphysis, fused hip, fracture of the pelvis, and diastrophic variant. (PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED) Concurrence of CDRH, Office of Device Evaluation (ODE) Over-The-Counter Use _____ OR (Optional Format 1-2-96)

(Division Sign-Off)

Division of General Restorative Devices

510(k) Number _____ K003478

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